

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

FREEDOM PROJECT; THE

ADDRESS (number and street)

320 1st Street SE

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20003

1838

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00305805

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2011

through

07

31

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Lisa Lisker

Signature of Treasurer

Electronically Filed by Lisa Lisker

Date

08

19

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
FREEDOM PROJECT; THE

Report Covering the Period: From: M M  
0 7 D D  
0 1 Y Y Y Y  
2 0 1 1 To: M M  
0 7 D D  
3 1 Y Y Y Y  
2 0 1 1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 1</span>		71566.62
(b) Cash on Hand at Beginning of Reporting Period .....	811021.31	
(c) Total Receipts (from Line 19) .....	110214.82	1518887.36
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	921236.13	1590453.98
7. Total Disbursements (from Line 31) .....	99701.94	768919.79
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	821534.19	821534.19
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

FREEDOM PROJECT; THE

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	7	0	1	2	0	1	1

To:

M	M	D	D	Y	Y	W	Y
0	7	3	1	2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) .....	16450.00	253500.00
(ii) Unitemized .....	50.00	1971.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	16500.00	255471.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	46000.00	679690.59
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	62500.00	935161.59
12. Transfers From Affiliated/Other Party Committees .....	47240.24	568156.33
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	474.58	10569.44
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	110214.82	1518887.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	110214.82	1518887.36

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	58701.94	430619.79	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	58701.94	430619.79	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	40000.00	337000.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	1000.00	1000.00	
(b) Political Party Committees .....	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	1000.00	1000.00	
29. Other Disbursements.....	0.00	300.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	99701.94	768919.79	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	99701.94	768919.79	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	62500.00	935161.59
34. Total Contribution Refunds (from Line 28(d)) .....	1000.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	61500.00	934161.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	58701.94	430619.79
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	474.58	10569.44
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	58227.36	420050.35

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM PROJECT; THE**

**A.**

Full Name (Last, First, Middle Initial)

Mr. Keith Lindner

Mailing Address 534 Ponte Vedra Boulevard

City

Ponte Vedra Beach

State

FL

Zip Code

32082-2316

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Financial Group

Occupation

Co-President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 15 / 2011

Transaction ID: SA11AI-3753-24236-c

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Carl Mammel

Mailing Address 8805 Indian Hills Drive

City

Omaha

State

NE

Zip Code

68114-6020

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Mammel Schropp Swarte

Occupation

Insurance

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 18 / 2011

Transaction ID: SA11AI-4168-24169-c

Amount of Each Receipt this Period

450.00

**C.**

Full Name (Last, First, Middle Initial)

Carl Lindner

Mailing Address 8555 Shawnee Run Road

City

Cincinnati

State

OH

Zip Code

45243-3314

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Financial

Occupation

Chairman

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 15 / 2011

Transaction ID: SA11AI-5430-24234-c

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

10450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Carl Lindner, III

Mailing Address 9450 Whitegate Lane

City

Cincinnati

State

OH

Zip Code

45243-1648

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Financial Corpor-  
ation

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 5 / 2 0 1 1

Transaction ID: SA11AI-5432-24233-c

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Mitch Bainwol

Mailing Address 1775 I Street NW  
 Floor 7

City

Washington

State

DC

Zip Code

20006-2402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RIAA

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 8 / 2 0 1 1

Transaction ID: SA11AI-6384-24173-c

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

16450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 45

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM PROJECT; THE**

**A.**

Full Name (Last, First, Middle Initial)  
**AFLAC INCORPORATED POLITICAL ACTION COMMITTEE AFLAC PAC**  
 Mailing Address **1932 Wynnton Road**

City State Zip Code  
**Columbus GA 31999-0001**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**3750.00**

Date of Receipt

**07 / 31 / 2011**

**Transaction ID: SA12-4140-24166-P**

Amount of Each Receipt this Period

**1250.00**

**[MEMO ITEM]**

Transfer Subitemization  
of TFP-FOJB Committee

**B.**

Full Name (Last, First, Middle Initial)  
**ALPHA NATURAL RESOURCES, INC. POLITICAL ACTION COMMITTEE**  
 Mailing Address **999 Corporate Boulevard  
 Suite 300**

City State Zip Code  
**Linthicum Heights MD 21090-2271**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5000.00**

Date of Receipt

**07 / 31 / 2011**

**Transaction ID: SA12-14059-24166-P**

Amount of Each Receipt this Period

**5000.00**

**[MEMO ITEM]**

Transfer Subitemization  
of TFP-FOJB Committee

**C.**

Full Name (Last, First, Middle Initial)  
**American Psychiatric Association Political Action Committee**  
 Mailing Address **1000 Wilson Boulevard  
 Suite 1825**

City State Zip Code  
**Arlington VA 22209-3924**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5000.00**

Date of Receipt

**07 / 31 / 2011**

**Transaction ID: SA12-10325-24166-P**

Amount of Each Receipt this Period

**5000.00**

**[MEMO ITEM]**

Transfer Subitemization  
of TFP-FOJB Committee

**SUBTOTAL** of Receipts This Page (optional) .....

**0.00**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 45

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
 NATIONAL ASSOCIATION OF CHAIN DRUG STORES PAC  
 Mailing Address 413 N Lee Street

City State Zip Code  
 Alexandria VA 22314-2301

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 1 1

Transaction ID: SA12-14060-24166-P

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

Transfer Subitemization  
of TFP-FOJB Committee

**B.**

Full Name (Last, First, Middle Initial)  
 National Association Of Professional Surplus Lines Offices (NAPSLO) PAC  
 Mailing Address 805 15th Street NW  
 Suite 700

City State Zip Code  
 Washington DC 20005-2282

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 1 1

Transaction ID: SA12-10903-24166-P

Amount of Each Receipt this Period

2500.00

**[MEMO ITEM]**

Transfer Subitemization  
of TFP-FOJB Committee

**C.**

Full Name (Last, First, Middle Initial)  
 NATIONAL VENTURE CAPITAL ASSOCIATION VENTUREPAC  
 Mailing Address 1655 Fort Myer Drive

City State Zip Code  
 Arlington VA 22209-3113

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 1 1

Transaction ID: SA12-4115-24166-P

Amount of Each Receipt this Period

2500.00

**[MEMO ITEM]**

Transfer Subitemization  
of TFP-FOJB Committee

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 45

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM PROJECT; THE**

**A.**

Full Name (Last, First, Middle Initial)  
 News America-Fox PAC

Mailing Address **444 N Capitol Street NW**  
**Suite 722**

City State Zip Code  
**Washington DC 20001-1534**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
**07 31 2011**

**Transaction ID: SA12-7293-24166-P**

Amount of Each Receipt this Period

2500.00

**[MEMO ITEM]**

Transfer Subitemization  
of TFP-FOJB Committee

**B.**

Full Name (Last, First, Middle Initial)  
 Poker Players Alliance PAC

Mailing Address **1325 G Street NW**  
**Suite 500**

City State Zip Code  
**Washington DC 20005-3136**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
**07 31 2011**

**Transaction ID: SA12-14061-24166-P**

Amount of Each Receipt this Period

1250.00

**[MEMO ITEM]**

Transfer Subitemization  
of TFP-FOJB Committee

**C.**

Full Name (Last, First, Middle Initial)  
 Staffing PAC

Mailing Address **277 S Washington Street**  
**Suite 200**

City State Zip Code  
**Alexandria VA 22314-3675**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
**07 31 2011**

**Transaction ID: SA12-9762-24166-P**

Amount of Each Receipt this Period

2500.00

**[MEMO ITEM]**

Transfer Subitemization  
of TFP-FOJB Committee

**SUBTOTAL** of Receipts This Page (optional) .....

**0.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 45

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM PROJECT; THE**

**A.**

Full Name (Last, First, Middle Initial)  
**TrueBlue, Inc. PAC**

Mailing Address **PO Box 2910**

City State Zip Code  
**Tacoma WA 98401-2910**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
**07 31 2011**

**Transaction ID: SA12-14058-24166-P**

Amount of Each Receipt this Period

1250.00

**[MEMO ITEM]**

Transfer Subitemization  
of TFP-FOJB Committee

**B.**

Full Name (Last, First, Middle Initial)  
**Joseph Craft**

Mailing Address **1717 S Boulder Avenue  
Suite 400**

City State Zip Code  
**Tulsa OK 74119-4833**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Alliance Resource Partners  
L**

Occupation  
**Executive**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
**07 31 2011**

**Transaction ID: SA12-14067-24163-P**

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

Transfer Subitemization  
of Boehner for Speaker

**C.**

Full Name (Last, First, Middle Initial)  
**Robert Dotchin**

Mailing Address **412 N Saint Asaph Street**

City State Zip Code  
**Alexandria VA 22314-2318**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**The Advocacy Group**

Occupation  
**Partner**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
**07 31 2011**

**Transaction ID: SA12-5640-24166-P**

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

Transfer Subitemization  
of TFP-FOJB Committee

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 45

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
 Mr. J. Brad Edwards

Mailing Address 2422 Taylor Avenue

City State Zip Code  
 Alexandria VA 22302-3306

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Jenkins Hill Consulting  
 LLC

Occupation  
 Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 1 1

Transaction ID: SA12-5544-24166-P

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

Transfer Subitemization  
 of TFP-FOJB Committee

**B.**

Full Name (Last, First, Middle Initial)  
 Stanley Gault

Mailing Address 407 W Wayne Avenue

City State Zip Code  
 Wooster OH 44691-1581

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Retired

Occupation  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 1 1

Transaction ID: SA12-14065-24163-P

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

Transfer Subitemization  
 of Boehner for Speaker

**C.**

Full Name (Last, First, Middle Initial)  
 Harriet James Melvin

Mailing Address 1133 Connecticut Avenue NW  
 Floor 5

City State Zip Code  
 Washington DC 20036-4305

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 1 1

Transaction ID: SA12-6356-24166-P

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

Transfer Subitemization  
 of TFP-FOJB Committee

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 45

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM PROJECT; THE**

**A.**

Full Name (Last, First, Middle Initial)  
**Ken Langone**

Mailing Address **375 Park Avenue**

City State Zip Code  
**New York NY 10152-0002**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Invemed**

Occupation  
**Businessman**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5000.00**

Date of Receipt

**07 / 31 / 2011**

**Transaction ID: SA12-14064-24163-P**

Amount of Each Receipt this Period

**5000.00**

**[MEMO ITEM]**

Transfer Subitemization  
of Boehner for Speaker

**B.**

Full Name (Last, First, Middle Initial)  
**Frederick Paup**

Mailing Address **26032 SE 30th Street**

City State Zip Code  
**Sammamish WA 98075-9107**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Manson Construction Co.**

Occupation  
**Executive Vp**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**07 / 31 / 2011**

**Transaction ID: SA12-14062-24166-P**

Amount of Each Receipt this Period

**250.00**

**[MEMO ITEM]**

Transfer Subitemization  
of TFP-FOJB Committee

**C.**

Full Name (Last, First, Middle Initial)  
**George Ramonas**

Mailing Address **1350 I Street NW  
Suite 680**

City State Zip Code  
**Washington DC 20005-3305**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**The Advocacy Group**

Occupation  
**Attorney**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**07 / 31 / 2011**

**Transaction ID: SA12-6039-24166-P**

Amount of Each Receipt this Period

**500.00**

**[MEMO ITEM]**

Transfer Subitemization  
of TFP-FOJB Committee

**SUBTOTAL** of Receipts This Page (optional) .....

**0.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 45

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM PROJECT; THE**

**A.**

Full Name (Last, First, Middle Initial)  
 Susan Simms

Mailing Address 4809 Au Sable Drive

City State Zip Code  
 Gibsonsia PA 15044-8349

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 West Penn Allegheny Health  
 S

Occupation  
 Registered Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 1 1

Transaction ID: SA12-14063-24163-P

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

Transfer Subitemization  
of Boehner for Speaker

**B.**

Full Name (Last, First, Middle Initial)  
 Joseph Znidarsic

Mailing Address 100 7th Avenue

City State Zip Code  
 Chardon OH 44024-7804

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 CFD Trust

Occupation  
 TTEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 1 1

Transaction ID: SA12-14066-24163-P

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

Transfer Subitemization  
of Boehner for Speaker

**C.**

Full Name (Last, First, Middle Initial)  
 Boehner for Speaker

Mailing Address 320 1st Street SE

City State Zip Code  
 Washington DC 20003-1838

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

187200.78

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 1 1

Transaction ID: SA12-11479-24163-c

Amount of Each Receipt this Period

11812.44

Transfer from Joint Commi-  
tee

**SUBTOTAL** of Receipts This Page (optional) .....

11812.44

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 45

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

TFP-FOJB Committee

Mailing Address 320 1st Street SE

City

Washington

State

DC

Zip Code

20003-1838

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

371227.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	1

Transaction ID: SA12-12562-24166-c

Amount of Each Receipt this Period

35427.80

Transfer from Joint Commi-  
tee

SUBTOTAL of Receipts This Page (optional) .....

35427.80

TOTAL This Period (last page this line number only) .....

47240.24

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 45

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial) AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE (SKIN PAC)

Mailing Address 1445 New York Avenue NW  
 Suite 800

City State Zip Code  
 Washington DC 20005-2125

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 1 8 / 2 0 1 1

Transaction ID: SA11C-14049-24171-c

Amount of Each Receipt this Period

5000.00

**B.** Full Name (Last, First, Middle Initial) American Institute Of Certified Public Accountants PAC (AICPA PAC)

Mailing Address Palladian Corporate Center  
 220 Leigh Farm Rd

City State Zip Code  
 Durham NC 27707

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 2 7 / 2 0 1 1

Transaction ID: SA11C-9964-24168-c

Amount of Each Receipt this Period

5000.00

**C.** Full Name (Last, First, Middle Initial) AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 1 Amgen Center Drive

City State Zip Code  
 Newbury Park CA 91320-1730

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 1 5 / 2 0 1 1

Transaction ID: SA11C-4003-24230-c

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

15000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 45

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
 CHICAGO BOARD OF OPTIONS EXCHANGE INC PAC

Mailing Address 400 S. LaSalle Street

City State Zip Code  
 Chicago IL 60605

FEC ID number of contributing  
federal political committee.

**C** C00100693

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 7 / 2 0 1 1

Transaction ID: SA11C-4268-24167-c

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
 CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

Mailing Address 333 S Wabash Avenue  
 # 43-S

City State Zip Code  
 Chicago IL 60604-4107

FEC ID number of contributing  
federal political committee.

**C** C00078287

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 8 / 2 0 1 1

Transaction ID: SA11C-14050-24172-c

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)  
 LIMITED BRANDS INC., PAC

Mailing Address 3 Limited Parkway

City State Zip Code  
 Columbus OH 43230-1467

FEC ID number of contributing  
federal political committee.

**C** C00214338

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 5 / 2 0 1 1

Transaction ID: SA11C-8030-24232-c

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

12000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 45

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM PROJECT; THE**

**A.**

Full Name (Last, First, Middle Initial)  
**Managed Funds Association Political Action Committee**

Mailing Address **2025 M Street NW**  
**Suite 800**

City State Zip Code  
**Washington DC 20036-2422**

FEC ID number of contributing  
federal political committee. **C** **C00306894**

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5000.00**

Date of Receipt

**07 / 31 / 2011**

**Transaction ID: SA11C-9668-24164-c**

Amount of Each Receipt this Period

**5000.00**

**B.**

Full Name (Last, First, Middle Initial)  
**Mcapitol Management / Mwh Americas Pac**

Mailing Address **380 Interlocken Crescent**  
**Suite 200**

City State Zip Code  
**Broomfield CO 80021-8026**

FEC ID number of contributing  
federal political committee. **C** **C00242370**

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5000.00**

Date of Receipt

**07 / 31 / 2011**

**Transaction ID: SA11C-11230-24165-c**

Amount of Each Receipt this Period

**5000.00**

**C.**

Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF BROADCASTERS TELEVISION AND RADIO POLITICAL ACTION COMMITTEE**

Mailing Address **1771 N Street NW**

City State Zip Code  
**Washington DC 20036-2800**

FEC ID number of contributing  
federal political committee. **C** **C00009985**

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5000.00**

Date of Receipt

**07 / 18 / 2011**

**Transaction ID: SA11C-3811-24170-c**

Amount of Each Receipt this Period

**5000.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**15000.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 45

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

United Airlines, Inc. PAC

Mailing Address PO Box 66423

City

Chicago

State

IL

Zip Code

60666-0423

FEC ID number of contributing  
federal political committee.**C**

C00078261

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	1

Transaction ID: SA11C-9251-24231-c

Amount of Each Receipt this Period

4000.00

SUBTOTAL of Receipts This Page (optional) .....

4000.00

TOTAL This Period (last page this line number only) .....

46000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 45

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
 Commonwealth of Virginia

Mailing Address PO Box 27264

City State Zip Code  
 Richmond VA 23261-7264

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.82

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 5 / 2 0 1 1

Transaction ID: SA15-8564-24239-e

Amount of Each Receipt this Period

146.58

Payroll Taxes-refund 6/30-  
 /08 exp.

**B.**

Full Name (Last, First, Middle Initial)  
 Office of Tax and Revenue

Mailing Address PO Box 96385

City State Zip Code  
 Washington DC 20090-6385

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1116.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 5 / 2 0 1 1

Transaction ID: SA15-4077-20365-e

Amount of Each Receipt this Period

328.00

Payroll taxes-Refund 1/30-  
 /09 exp.

**SUBTOTAL** of Receipts This Page (optional) .....

474.58

**TOTAL** This Period (last page this line number only) .....

474.58

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Authorize.net

Mailing Address 808 East Utah Dr.

City  
American Fork

State  
UT

Zip Code  
84003

Purpose of Disbursement

Merchant Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-11844-24178-e

Date of Disbursement

07 / 05 / 2011

Amount of Each Disbursement this Period

82.90

**B.**

Full Name (Last, First, Middle Initial)

Authorize.net

Mailing Address 808 East Utah Dr.

City  
American Fork

State  
UT

Zip Code  
84003

Purpose of Disbursement

Credit Card Processing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-11844-24240-e

Date of Disbursement

07 / 05 / 2011

Amount of Each Disbursement this Period

2.00

**C.**

Full Name (Last, First, Middle Initial)

Capitol Hill Club

Mailing Address 300 1st Street SE

City  
Washington

State  
DC

Zip Code  
20003-1801

Purpose of Disbursement

Event Catering

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-5501-24182-e

Date of Disbursement

07 / 15 / 2011

Amount of Each Disbursement this Period

183.66

**SUBTOTAL** of Disbursements This Page (optional) .....

268.56

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Chain Bridge Bank

Mailing Address 1445 Laughlin Avenue  
Suite A

City Mclean State VA Zip Code 22101-5737

Purpose of Disbursement

Payroll Taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-10391-24196-e

Date of Disbursement

07 / 15 / 2011

Amount of Each Disbursement this Period

1787.77

**B.**

Full Name (Last, First, Middle Initial)

Chain Bridge Bank

Mailing Address 1445 Laughlin Avenue  
Suite A

City Mclean State VA Zip Code 22101-5737

Purpose of Disbursement

Payroll Taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-10391-24197-e

Date of Disbursement

07 / 15 / 2011

Amount of Each Disbursement this Period

774.17

**C.**

Full Name (Last, First, Middle Initial)

Chain Bridge Bank

Mailing Address 1445 Laughlin Avenue  
Suite A

City Mclean State VA Zip Code 22101-5737

Purpose of Disbursement

Bank Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-10391-24198-e

Date of Disbursement

07 / 15 / 2011

Amount of Each Disbursement this Period

5.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2566.94

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Chain Bridge Bank</p> <p>Mailing Address 1445 Laughlin Avenue Suite A</p> <p>City Mclean State VA Zip Code 22101-5737</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-10391-24221-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1787.80"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Chain Bridge Bank</p> <p>Mailing Address 1445 Laughlin Avenue Suite A</p> <p>City Mclean State VA Zip Code 22101-5737</p> <p>Purpose of Disbursement Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-10391-24222-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="87.80"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Clark, Schaefer, Hackett &amp; Company</p> <p>Mailing Address 160 N Breiel Boulevard</p> <p>City Middletown State OH Zip Code 45042-3806</p> <p>Purpose of Disbursement Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-6282-24223-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="65.00"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**1940.60**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
Clark, Schaefer, Hackett & Company

Mailing Address 160 N Breiel Boulevard

City Middletown State OH Zip Code 45042-3806

Purpose of Disbursement  
Accounting Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-6282-24224-e  
Date of Disbursement

07 / 15 / 2011

Amount of Each Disbursement this Period

30.00

**B.** Full Name (Last, First, Middle Initial)  
Clark, Schaefer, Hackett & Company

Mailing Address 160 N Breiel Boulevard

City Middletown State OH Zip Code 45042-3806

Purpose of Disbursement  
Accounting Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-6282-24225-e  
Date of Disbursement

07 / 29 / 2011

Amount of Each Disbursement this Period

65.00

**C.** Full Name (Last, First, Middle Initial)  
Commonwealth of Virginia

Mailing Address PO Box 27264

City Richmond State VA Zip Code 23261-7264

Purpose of Disbursement  
Payroll Taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-8564-24218-e  
Date of Disbursement

07 / 29 / 2011

Amount of Each Disbursement this Period

210.62

**SUBTOTAL** of Disbursements This Page (optional) .....

305.62

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
Department of Employment Services

Mailing Address PO Box 96664

City Washington State DC Zip Code 20090-6664

Purpose of Disbursement

Payroll Taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-4076-24219-e  
Date of Disbursement

07 / 29 / 2011

Amount of Each Disbursement this Period

674.83

**B.** Full Name (Last, First, Middle Initial)  
Mastercard

Mailing Address PO Box 42070

City Middletown State OH Zip Code 45042-0070

Purpose of Disbursement

Credit Card Payment (see memos)

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-3605-24229-e  
Date of Disbursement

07 / 22 / 2011

Amount of Each Disbursement this Period

10558.34

**C.** Full Name (Last, First, Middle Initial)  
Congressional Liquors

Mailing Address 404 1st Street SE

City Washington State DC Zip Code 20003-1826

Purpose of Disbursement

PAC Food/Beverage

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-6678-11354-V  
Date of Disbursement

07 / 22 / 2011

Amount of Each Disbursement this Period

168.75

**[MEMO ITEM]**

Subitemization of Mastercard ( 07/22/11 )

**SUBTOTAL** of Disbursements This Page (optional) .....

11233.17

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Bullfeathers Restaurant

Mailing Address 410 1st Street SE

City  
Washington

State  
DC

Zip Code  
20003-1819

Purpose of Disbursement  
PAC Food/Beverage

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-7136-11352-V

Date of Disbursement

07 / 22 / 2011

Amount of Each Disbursement this Period

245.97

**[MEMO ITEM]**

Subitemization of Mastercard ( 07/22/11 )

**B.**

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address PO Box 17577

City  
Baltimore

State  
MD

Zip Code  
21297-0513

Purpose of Disbursement  
PAC Data Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-8324-11370-V

Date of Disbursement

07 / 22 / 2011

Amount of Each Disbursement this Period

40.00

**[MEMO ITEM]**

Subitemization of Mastercard ( 07/22/11 )

**C.**

Full Name (Last, First, Middle Initial)

Cosi

Mailing Address 301 Pennsylvania Avenue, NW

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
PAC Food/Beverage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-10015-11355-V

Date of Disbursement

07 / 22 / 2011

Amount of Each Disbursement this Period

224.64

**[MEMO ITEM]**

Subitemization of Mastercard ( 07/22/11 )

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Hampton Inn Mailing Address 9266 Schulze Drive	<b>Transaction ID:</b> SB21B-10016-11358-V <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 1 1</div> </div>
City West Chester State OH Zip Code 45069-6531 Purpose of Disbursement PAC Lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>295.86</div> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 07/22/11 )
<b>B.</b> Full Name (Last, First, Middle Initial) 123 Together.com Mailing Address 111 S Bedford Street Suite 200 City Burlington State MA Zip Code 01803-5145 Purpose of Disbursement PAC Web Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB21B-10075-11348-V <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>119.91</div> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 07/22/11 )
<b>C.</b> Full Name (Last, First, Middle Initial) Guapos Mailing Address 4036 28th Street S City Arlington State VA Zip Code 22206-2202 Purpose of Disbursement PAC Food/Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB21B-10172-11357-V <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>217.05</div> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 07/22/11 )
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Intercontinental	<b>Transaction ID:</b> SB21B-10815-11359-V <b>Date of Disbursement</b>																				
Mailing Address 9801 Carnegie Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	1	1												
City Cleveland State OH Zip Code 44106-2100	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Facility Rental Candidate Name	<table border="1"> <tr> <td colspan="10">4500.00</td> </tr> </table>	4500.00																			
4500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>[MEMO ITEM]</b> Subitemization of Mastercard ( 07/22/11 )																				
<b>B.</b> Full Name (Last, First, Middle Initial) Teleflora	<b>Transaction ID:</b> SB21B-10871-11366-V <b>Date of Disbursement</b>																				
Mailing Address PO Box 60910	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	1	1												
City Los Angeles State CA Zip Code 90060-0910	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Office Supplies Candidate Name	<table border="1"> <tr> <td colspan="10">154.94</td> </tr> </table>	154.94																			
154.94																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>[MEMO ITEM]</b> Subitemization of Mastercard ( 07/22/11 )																				
<b>C.</b> Full Name (Last, First, Middle Initial) Potenza Trattoria	<b>Transaction ID:</b> SB21B-11165-11367-V <b>Date of Disbursement</b>																				
Mailing Address 1430 H Street NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	1	1												
City Washington State DC Zip Code 20005-2104	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Food/Beverage Candidate Name	<table border="1"> <tr> <td colspan="10">1340.47</td> </tr> </table>	1340.47																			
1340.47																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>[MEMO ITEM]</b> Subitemization of Mastercard ( 07/22/11 )																				
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ►	<table border="1"> <tr> <td colspan="10">0.00</td> </tr> </table>	0.00																			
0.00																					
<b>TOTAL</b> This Period (last page this line number only) ..... ►	<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Mailchimp.com	<b>Transaction ID:</b> SB21B-12123-11360-V <b>Date of Disbursement</b>																				
Mailing Address 512 Means Street NW Suite 404	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	1	1												
City Atlanta State GA Zip Code 30318-5788	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Software Candidate Name	<table border="1"> <tr> <td colspan="10">236.00</td> </tr> </table>	236.00																			
236.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> Subitemization of Mastercard ( 07/22/11 )																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) AT&T Data	<b>Transaction ID:</b> SB21B-12409-11350-V <b>Date of Disbursement</b>																				
Mailing Address 785 7th Street NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	1	1												
City Washington State DC Zip Code 20001-3715	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Data Fee Candidate Name	<table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table>	25.00																			
25.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> Subitemization of Mastercard ( 07/22/11 )																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) US Airways	<b>Transaction ID:</b> SB21B-3616-11369-V <b>Date of Disbursement</b>																				
Mailing Address 2345 Crystal Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	1	1												
City Arlington State VA Zip Code 22227-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Air Fare Candidate Name	<table border="1"> <tr> <td colspan="10">410.60</td> </tr> </table>	410.60																			
410.60																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> Subitemization of Mastercard ( 07/22/11 )																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) FedEx Corporation	<b>Transaction ID:</b> SB21B-3721-11356-V <b>Date of Disbursement</b>																				
Mailing Address 101 Constitution Avenue NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	1	1												
City Washington State DC Zip Code 20001-2133 Purpose of Disbursement PAC Shipping Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>67.37</td> </tr> </table>	67.37																			
67.37																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> Subitemization of Mastercard ( 07/22/11 )																				
<b>B.</b> Full Name (Last, First, Middle Initial) Morton's of Arlington	<b>Transaction ID:</b> SB21B-4382-11362-V <b>Date of Disbursement</b>																				
Mailing Address 1750 Crystal Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	1	1												
City Arlington State VA Zip Code 22202-3401 Purpose of Disbursement PAC Food/Beverage Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>357.80</td> </tr> </table>	357.80																			
357.80																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> Subitemization of Mastercard ( 07/22/11 )																				
<b>C.</b> Full Name (Last, First, Middle Initial) The Monocle	<b>Transaction ID:</b> SB21B-5323-11361-V <b>Date of Disbursement</b>																				
Mailing Address 107 D Street NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	1	1												
City Washington State DC Zip Code 20002-5613 Purpose of Disbursement PAC Event Catering Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>335.38</td> </tr> </table>	335.38																			
335.38																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> Subitemization of Mastercard ( 07/22/11 )																				

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Capitol Hill Club

Mailing Address 300 1st Street SE

City Washington State DC Zip Code 20003-1801

Purpose of Disbursement  
PAC Facility Rental

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-5501-11353-V

Date of Disbursement

07 / 22 / 2011

Amount of Each Disbursement this Period

1023.66

**[MEMO ITEM]**

Subitemization of Mastercard ( 07/22/11 )

**B.**

Full Name (Last, First, Middle Initial)

Staples

Mailing Address 8 Technology Drive  
# 1020

City Westborough State MA Zip Code 01581-1756

Purpose of Disbursement  
PAC Office Supplies

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-6636-11364-V

Date of Disbursement

07 / 22 / 2011

Amount of Each Disbursement this Period

394.80

**[MEMO ITEM]**

Subitemization of Mastercard ( 07/22/11 )

**C.**

Full Name (Last, First, Middle Initial)

Moran Graphics Inc

Mailing Address 3472 N Waggoner Road

City Blacklick State OH Zip Code 43004-8566

Purpose of Disbursement  
PAC Web Design

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-14055-24227-e

Date of Disbursement

07 / 25 / 2011

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
National Republican Congressional Committee

Mailing Address 320 1st Street SE

City Washington State DC Zip Code 20003-1838

Purpose of Disbursement  
PAC Travel-Usual & Normal Charge

Candidate Name  
National Republican Congressional Committee

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-7991-24181-e  
Date of Disbursement

07 / 15 / 2011

Amount of Each Disbursement this Period

2955.07

**B.**

Full Name (Last, First, Middle Initial)  
NJ1 New Media, LLC

Mailing Address 201 King Street

City Alexandria State VA Zip Code 22314-6600

Purpose of Disbursement  
PAC Web Services

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-11448-24185-e  
Date of Disbursement

07 / 15 / 2011

Amount of Each Disbursement this Period

9600.00

**C.**

Full Name (Last, First, Middle Initial)  
Office of Tax and Revenue

Mailing Address PO Box 96385

City Washington State DC Zip Code 20090-6385

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-4077-24220-e  
Date of Disbursement

07 / 29 / 2011

Amount of Each Disbursement this Period

612.00

**SUBTOTAL** of Disbursements This Page (optional) .....

13167.07

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 17464	<b>Transaction ID:</b> SB21B-9037-24183-e <b>Date of Disbursement</b> <div> <div>07</div> <div>15</div> <div>2011</div> </div>
City Baltimore State MD Zip Code 21297-1464 Purpose of Disbursement Phone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>563.76</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Washington Courier Mailing Address 5520 Cherokee Avenue Suite 120 City Alexandria State VA Zip Code 22312-2319 Purpose of Disbursement Delivery Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-9969-24184-e <b>Date of Disbursement</b> <div> <div>07</div> <div>15</div> <div>2011</div> </div> <b>Amount of Each Disbursement this Period</b> <div>159.29</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Washington Courier Mailing Address 5520 Cherokee Avenue Suite 120 City Alexandria State VA Zip Code 22312-2319 Purpose of Disbursement Delivery Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-9969-24199-e <b>Date of Disbursement</b> <div> <div>07</div> <div>25</div> <div>2011</div> </div> <b>Amount of Each Disbursement this Period</b> <div>130.69</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**853.74**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Whatman Associates, Inc.	<b>Transaction ID:</b> SB21B-12568-24179-e <b>Date of Disbursement</b>																				
Mailing Address 6650 Stoffer Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	5		2	0	1	1												
City Bellville State OH Zip Code 44813	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Strategic Consulting Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Whatman Associates, Inc.	<b>Transaction ID:</b> SB21B-12568-24207-e <b>Date of Disbursement</b>																				
Mailing Address 6650 Stoffer Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	5		2	0	1	1												
City Bellville State OH Zip Code 44813	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Strategic Consulting Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Wiley Rein LLP	<b>Transaction ID:</b> SB21B-3634-24180-e <b>Date of Disbursement</b>																				
Mailing Address 1776 K Street NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	2		2	0	1	1												
City Washington State DC Zip Code 20006-2304	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Legal Fees Candidate Name	<table border="1"> <tr> <td colspan="10">5104.20</td> </tr> </table>	5104.20																			
5104.20																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

15104.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Kevin Boland	<b>Transaction ID:</b> SB21B-12563-24186-e <b>Date of Disbursement</b>																				
Mailing Address 1360 E Capitol Street NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	1	1												
City Washington State DC Zip Code 20003-1533	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll Candidate Name	<table border="1"> <tr> <td colspan="10">384.05</td> </tr> </table>	384.05																			
384.05																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Kevin Boland	<b>Transaction ID:</b> SB21B-12563-24209-e <b>Date of Disbursement</b>																				
Mailing Address 1360 E Capitol Street NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	9		2	0	1	1												
City Washington State DC Zip Code 20003-1533	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll Candidate Name	<table border="1"> <tr> <td colspan="10">383.83</td> </tr> </table>	383.83																			
383.83																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) John Criscuolo	<b>Transaction ID:</b> SB21B-10858-24187-e <b>Date of Disbursement</b>																				
Mailing Address 1845 A Street SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	1	1												
City Washington State DC Zip Code 20003-1706	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll Candidate Name	<table border="1"> <tr> <td colspan="10">350.21</td> </tr> </table>	350.21																			
350.21																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1118.09

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)

John Criscuolo

Mailing Address 1845 A Street SE

City  
Washington

State  
DC

Zip Code  
20003-1706

Purpose of Disbursement  
Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-10858-24210-e

Date of Disbursement

07 / 29 / 2011

Amount of Each Disbursement this Period

350.20

B.

Full Name (Last, First, Middle Initial)

Sean Finnerty

Mailing Address 3850 Tunlaw Road NW  
Apt. 606

City  
Washington

State  
DC

Zip Code  
20007-4837

Purpose of Disbursement  
Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-12696-24188-e

Date of Disbursement

07 / 15 / 2011

Amount of Each Disbursement this Period

557.96

C.

Full Name (Last, First, Middle Initial)

Sean Finnerty

Mailing Address 3850 Tunlaw Road NW  
Apt. 606

City  
Washington

State  
DC

Zip Code  
20007-4837

Purpose of Disbursement  
Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-12696-24211-e

Date of Disbursement

07 / 29 / 2011

Amount of Each Disbursement this Period

557.97

SUBTOTAL of Disbursements This Page (optional) .....

1466.13

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 37 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
Nicholas Flocken

Mailing Address 35400 Pheasant Court

City Solon State OH Zip Code 44139-2465

Purpose of Disbursement  
Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-12692-24189-e  
Date of Disbursement

07 / 15 / 2011

Amount of Each Disbursement this Period

350.21

**B.**

Full Name (Last, First, Middle Initial)  
Nicholas Flocken

Mailing Address 35400 Pheasant Court

City Solon State OH Zip Code 44139-2465

Purpose of Disbursement  
Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-12692-24212-e  
Date of Disbursement

07 / 29 / 2011

Amount of Each Disbursement this Period

350.21

**C.**

Full Name (Last, First, Middle Initial)  
Cory Fritz

Mailing Address 1360 E Capitol Street NE

City Washington State DC Zip Code 20003-1533

Purpose of Disbursement  
Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-12693-24190-e  
Date of Disbursement

07 / 15 / 2011

Amount of Each Disbursement this Period

779.33

**SUBTOTAL** of Disbursements This Page (optional) .....

1479.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Cory Fritz	<b>Transaction ID:</b> SB21B-12693-24195-e <b>Date of Disbursement</b>																				
Mailing Address 1360 E Capitol Street NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	1	1												
City Washington State DC Zip Code 20003-1533	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td colspan="10">1761.08</td> </tr> </table>	1761.08																			
1761.08																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Cory Fritz	<b>Transaction ID:</b> SB21B-12693-24200-e <b>Date of Disbursement</b>																				
Mailing Address 1360 E Capitol Street NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	5		2	0	1	1												
City Washington State DC Zip Code 20003-1533	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Travel	<table border="1"> <tr> <td colspan="10">221.88</td> </tr> </table>	221.88																			
221.88																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Cory Fritz	<b>Transaction ID:</b> SB21B-12693-24213-e <b>Date of Disbursement</b>																				
Mailing Address 1360 E Capitol Street NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	9		2	0	1	1												
City Washington State DC Zip Code 20003-1533	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td colspan="10">779.33</td> </tr> </table>	779.33																			
779.33																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

2762.29

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Curtis Isakson</p> <p>Mailing Address 1201 N Garfield Street Apt. 618</p> <p>City Arlington State VA Zip Code 22201-6812</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-11116-24191-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="432.59"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Curtis Isakson</p> <p>Mailing Address 1201 N Garfield Street Apt. 618</p> <p>City Arlington State VA Zip Code 22201-6812</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-11116-24214-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="432.59"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Robyn Knecht</p> <p>Mailing Address 1438 Meridian Place NW</p> <p>City Washington State DC Zip Code 20010-1962</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-12629-24192-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="353.21"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**1218.39**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Robyn Knecht	<b>Transaction ID:</b> SB21B-12629-24215-e <b>Date of Disbursement</b>																				
Mailing Address 1438 Meridian Place NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	9		2	0	1	1												
City Washington State DC Zip Code 20010-1962	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll Candidate Name	<table border="1"> <tr> <td colspan="10">352.99</td> </tr> </table>	352.99																			
352.99																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 001																					
<b>B.</b> Full Name (Last, First, Middle Initial) Kevin Mcgrann	<b>Transaction ID:</b> SB21B-4052-24193-e <b>Date of Disbursement</b>																				
Mailing Address 150 N Carolina Avenue SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	1	1												
City Washington State DC Zip Code 20003-1841	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll Candidate Name	<table border="1"> <tr> <td colspan="10">1542.66</td> </tr> </table>	1542.66																			
1542.66																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 001																					
<b>C.</b> Full Name (Last, First, Middle Initial) Kevin Mcgrann	<b>Transaction ID:</b> SB21B-4052-24216-e <b>Date of Disbursement</b>																				
Mailing Address 150 N Carolina Avenue SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	9		2	0	1	1												
City Washington State DC Zip Code 20003-1841	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll Candidate Name	<table border="1"> <tr> <td colspan="10">1542.91</td> </tr> </table>	1542.91																			
1542.91																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 001																					

**SUBTOTAL** of Disbursements This Page (optional) .....

**3438.56**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
Christopher McNulty

Mailing Address 44047 Lords Valley Terrace

City Ashburn State VA Zip Code 20147-3203

Purpose of Disbursement  
Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-12591-24194-e  
Date of Disbursement

07 / 15 / 2011

Amount of Each Disbursement this Period

619.38

**B.**

Full Name (Last, First, Middle Initial)  
Christopher McNulty

Mailing Address 44047 Lords Valley Terrace

City Ashburn State VA Zip Code 20147-3203

Purpose of Disbursement  
Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-12591-24217-e  
Date of Disbursement

07 / 29 / 2011

Amount of Each Disbursement this Period

619.37

SUBTOTAL of Disbursements This Page (optional) .....

1238.75

TOTAL This Period (last page this line number only) .....

58661.86

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 42 / 45

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Amodei for Nevada	<b>Transaction ID:</b> SB23-14056-24228-e <b>Date of Disbursement</b>
Mailing Address 503 N Division Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 2 / 2 0 1 1</div> </div>
City Carson City State NV Zip Code 89703-4104	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution to Committee	<div>5000.00</div>
Candidate Name Mark Eugene Amodei	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 02 Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special	
<b>B.</b> Full Name (Last, First, Middle Initial) Jim Gibbons for Congress	<b>Transaction ID:</b> SB23-14053-24226-e <b>Date of Disbursement</b>
Mailing Address PO Box 71712	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 9 / 2 0 1 1</div> </div>
City Clive State IA Zip Code 50325-0712	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution to Committee	<div>5000.00</div>
Candidate Name Jim Gibbons	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 03 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) LaTourette for Congress	<b>Transaction ID:</b> SB23-9358-24204-e <b>Date of Disbursement</b>
Mailing Address 320 Kenarden Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 1 1</div> </div>
City Highland Heights State OH Zip Code 44143-3710	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution to Committee	<div>5000.00</div>
Candidate Name Steven C LaTourette	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 14 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>15000.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 45

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Latta For Congress

Mailing Address 300 N Main Street

City  
Bowling Green

State  
OH

Zip Code  
43402-2423

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
Robert Edward Latta

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 05

Transaction ID: SB23-10167-24203-e  
Date of Disbursement

07 / 28 / 2011

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Republican Main Street Partnership PAC

Mailing Address 2201 Wisconsin Avenue NW  
Suite 320

City  
Washington

State  
DC

Zip Code  
20007-4105

Purpose of Disbursement  
Contribution to Committee

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2011  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-10195-24206-e  
Date of Disbursement

07 / 28 / 2011

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Tiberi for Congress

Mailing Address 2021 E Dublin Granville Road  
Suite 2000

City  
Columbus

State  
OH

Zip Code  
43229-3572

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
Patrick J Tiberi

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 12

Transaction ID: SB23-7994-24201-e  
Date of Disbursement

07 / 28 / 2011

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

15000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 45

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)  
Tuesday Group Political Action Committee

Mailing Address PO Box 40385

City Washington State DC Zip Code 20016-0385

Purpose of Disbursement  
Contribution to Committee

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2011  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23-10095-24205-e  
Date of Disbursement

07 / 28 / 2011

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)  
Walorski For Congress Inc

Mailing Address PO Box 954

City Mishawaka State IN Zip Code 46546-0954

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
Jackie Walorski

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: IN District: 02

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23-11802-24202-e  
Date of Disbursement

07 / 28 / 2011

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) .....

10000.00

TOTAL This Period (last page this line number only) .....

40000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 / 45

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)

Mitch Bainwol

Mailing Address 1775 I Street NW  
Floor 7

City Washington State DC Zip Code 20006-2402

Purpose of Disbursement  
Refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB28a-6384-24241-e

Date of Disbursement

07 / 21 / 2011

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

TOTAL This Period (last page this line number only) ▶

1000.00